

DEPARTMENT OF CONSUMER AFFAIRS

## STATE AND CONSUMER SERVICES AGENCY · ARNOLD SCHWARZENEGGER, GOVERNOR

## **Court Reporters Board of California**

2535 Capitol Oaks Drive, Suite 230, Sacramento, CA 95833 Toll Free Phone: 877-3ASKCRB (327-5272) • Fax: (916) 263-3664 www.courtreportersboard.ca.gov



## APPLICATION FOR EXAMINATION AS A CERTIFIED SHORTHAND REPORTER

For Office	ce Use Only
Cash No.	

Application must be submitted 30 days prior to examination.

**\$40 FEE** must accompany this application. Remit by money order, cashier's check or personal check payable to the Court Reporters Board of CA. **DO NOT SEND CASH.** A \$10 charge will be imposed for returned checks.

Read enclosed materials carefully before completing and submitting this application. The information requested is required under Chapter 13, Article 3 of the Business and Professions Code. All items are mandatory. Failure to provide any of the requested information will result in the application being rejected as incomplete. The information provided will be used to determine eligibility for examination. The official who is responsible for information maintenance is the Executive Officer to the Board, 2535 Capitol Oaks Drive, Suite 230, Sacramento, CA 95833, (916) 263-3660. Disclosure of your social security number is mandatory. Section 30 of the Business and Professions Code and Pub. L.94-455 [42 U.S.C.A. 405(c) (2)(C)] authorizes collection of your social security number. Your social security number will be used exclusively for tax enforcement purposes and for purposes of compliance with any judgment or order for family support in accordance with Section 11350.6 of the Welfare and Institutions Code. Any known or foreseeable interagency or intergovernmental transfer which may be made of the information, when necessary, or other Federal, State and local law enforcement agencies. If you fail to disclose your social security number, you will be reported to the Franchise Tax Board, which may assess a \$100 penalty against you. If additional space is needed to complete any section of this application, use additional sheets. You have a right to review the files on record which are maintained on you by the Board unless the records are exempted under Section 1798.40 of the Civil Code.

	(PLEASE TYPE OR PRINT)			
1.	FULL NAME La	st	First	Middle
	Have you ever used any other I If yes, what was that name?	name? Yes No	_	
2.	Residence Address:	Street and Number		Phone
	City	State	Zip Code	(Area Code and Number)
3.	Business Address:	Address: Firm Name, Street and Number		Phone
	City	State	Zip Code	(Area Code and Number)
4.	Birthdate:		5. Social Secu	urity Number:
6.	Education: Nam	ne of high school attended: _ Location: (City & State) _		
	Did you graduate from high sch	OOI? Yes Date: Date:		No
7.	A verified certificate of REPORTING SCHO	rt Reporting School of satisfactory completion of a pres OL, or certification from such school	scribed course of study from o	a CALIFORNIA RECOGNIZED COURT ficiency, and the ability to make a verbatim stained in Title 16 of California Code of

41A-1 (Rev. 7/07) Continued on reverse side

Qualifying Method (continued)  Work Experience provide all n	necessary paperwork	
Possess a National Court Report (attach photostatic copy	rters Association Certificate of Merit/or RPR of original certificate)	
Achieved Passing grade on the (attach photostatic copy	California State Hearing Reporters examinat of original pass letter)	tion
Licensed as a Shorthand Report Only the following state licenses (attach photostatic copy)	s are accepted by this Board: Georgia, Nevac	da and Texas
Have you previously applied for the California (  If yes, date last examined?	CSR examination ?	Yes No
Have you ever been licensed as a shorthand re  If yes, what state(s)?  Licensed as a shorthand re  If yes, what name?  Have you ever been disciplined by any shorthat  If yes, what state?	cense #: Issue Date: eporter under a different name?	Yes No Yes No Yes No Yes No
Have you ever been convicted of a crime (other plea of nolo contendere? (Convictions dismissed until answer is YES, please provide ALL the follows. 1. Court order showing final disposition, sanctions, 2. Court documents showing all sanctions and sensor 3. A letter from you, signed "under penalty of the late a) the circumstances which led to each contend to the current status of each term of each IMPORTANT: Falsification may result in the denial	nder Penal Code Section 1203.4 MUST be disclosed.)  Nowing certified documents for each offense, and sentence imposed.  Itences have been satisfied.  Itences have been satisfied.  Itences the State of California" indicating inviction, b) the specific terms of sentencing for each sentencing order.	Yes No
Have you ever been disciplined by ANY licens  If answer is YES, what licensing entity, in what		Yes No
If you are convicted of any crime(s) or have enter of this application and the time you pass the example information when applying for licensure. Failure application or revocation of your license.  I HEREBY CERTIFY under penalty of perjury under documents are true and correct, under the terms of FRAUD OR MISREPRESENTATION ARE GROUN	amination and apply for licensure, you must ne to notify the Board of the above, may result refer the laws of the State of California that the foregot the Certified Shorthand Reporters Law, with full	in denial of your  oing application and attached knowledge of the fact that
Date	Signature of Applicant	
IMPORTANT: Fee (certified check, permust accompany your application	rsonal check, or money order) and a	ny necessary documents

RETURN TO: Court Reporters Board of California 2535 Capitol Oaks Drive, Suite 230 Sacramento, California 95833